

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 700524	RECEIPT DATE:	11 / 15 / 00
IA NUMBER:	PCT/ US00 / 10477	IA FILING DATE:	04 / 19 / 00
FAMILY NAME:	KAPILOW	DELAY WAIVED (Y/N):	N
GIVEN NAME:	DAVID A.	DEMAND RECEIVED (Y/N):	N
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	04 / 19 / 99
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	1999-0096-TA	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 0000000000
			FAX

NAME: AT& T CORP.

STREET: P O BOX 4110

CITY: MIDDLETOWN

STATE/COUNTRY: NJ ZIP: 077484110

EMAIL:

APPLICATION TITLES:

METHOD AND APPARATUS FOR PERFORMING PACKET LOSS OR FRAME ERASURE CONCE
ALMENT

TAB TO LAST POSITION,PUSH SEND



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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Bib Data Sheet

SERIAL NUMBER 09/700,524	FILING DATE 11/15/2000 RULE -	CLASS 704	GROUP ART UNIT 2641	ATTORNEY DOCKET NO. 1999-0096
APPLICANTS David A. Kapilow, Berkeley Heights, NJ ; ** CONTINUING DATA ***** THIS APPLICATION IS A 371 OF PCT/US00/10477 04/19/2000 WHICH CLAIMS BENEFIT OF 60/130,016 04/19/1999 ** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/12/2000				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input checked="" type="checkbox"/> Allowance		STATE OR COUNTRY NJ	SHEETS DRAWING 14	TOTAL CLAIMS 32
ADDRESS AT & T Corporation PO Box 4110 Middletown ,NJ 07748		INDEPENDENT CLAIMS 2		
TITLE Method and apparatus for performing packet loss or frame erasure concealment				
FILING FEE RECEIVED 1076	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	